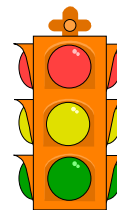


GUIDELINES – PROFICIENCY TESTING (PT) FAILURES

For Each PT Testing Event Review Graded Results



100 % - Sign results

<100% but >80% - investigate cause and document (Quality Assurance check)

<80% (<100% for Immunohematology, HIV) = PT Failure

For PT Failure

1. First failure - investigate cause and document

2. Second failure in 3 consecutive events

Stop patient testing

Notify state agency in writing

Investigate cause and document

Obtain technical assistance or training if needed (outside technical consultant or manufacturer's representative)

Investigate patient test results during the failure timeframe for impact on patient care

Pass two consecutive testing events (special off-cycle PT may be ordered from provider – or other CLIA approved provider to shorten compliance timeframe)

Send results to CLIA State agency (you will receive letter authorizing test resumption)

3. Third failure in 4 consecutive events (2 successful make-up events from #2 do **not** count in this formula)

Follow step 2 above

OR

Federal sanction(s) imposed

Stop testing for 6 months (passing 2 events sooner than 6 months does **not** shorten sanction time)

No Medicare / Medicaid reimbursement for 6 months

NOTES

Do not send or take PT to another lab (even in the same corporation). If your instrument is down or you are out of kits – report to the PT provider “test not performed because. . .” and notify the State agency.

Do not talk to anyone in another lab about the PT results until after the provider submission deadline.

Do not use PT samples for QA, training, etc. until after you receive the graded results.

Rotate PT among all testing personnel (all 5 samples in a set, i.e. CBC or routine chemistry must be done by one person for one event)

Treat testing same as patients (repeat an abnormal patient before reporting = okay to repeat abnormal PT before reporting)